

Trisomy 13/18 + NT

which indicates a low risk

The calculated risk for Trisomy 13/18 (with NT) is <1:10000,

\*Free Home Sample Collection 9999 778 778



Book a Test Online www.molq.in

Date of Report 17-06-2024 PRISCA 5.2.0.13

The laboratory cannot be hold responsible for their impact on the

risk assessment! Calculated risks have no diagnostic values

					PRISCA	5.2.0.13
Patient Data						
Name	MRS	. MANISI	HA GODARA	Patient ID		12407150288
Birthday			26-10-1997	Sample ID		11900109
Age at Sample date			26.7	Sample Date		15-07-2024
Gestational age			12+5			
Correction factors		·				
Fetuses	1	IVF		unknown	Previous trisomy 21	unknown
Weight in kg	59.4	Diabetes		NO	Pregnancies	unknown
Smoker	NO	Origin		Asian		
Biochemical Data				Ultrasound Data		
Parameter	Value		Corr Mom	Gestational ago	e	12+4
PAPP-A	5.8	mIU/ml	0.98	Method		CRL(<>Robinson)
fb-hCG	99.3 ng/ml		2.79	Scan date	15-07-2024	
Risks at sampling date				Crown rump l	ength in mm	61.4
Age Risk			1:882	Nuchal translu	icency MoM	0.69
Biochemical T21 risk	chemical T21 risk 1:426		1:426	Nasal bone present		
Combined trisomy 21 risk 1:2454		1:2454	Sonographer		DR.	
Trisomy 13/18 + NT			<b>&lt;</b> 1:10000	Qualifications	in measuring NT	MBBS
Risk					ome Risk (Trisomy 21	Screening)
1:100 1:100 1:1000 1:10000 1:10000				The calculated risk for Trisomy 21 test (with NT) is below the cut off, which represents a low risk.  After the result of the Trisomy 21 test (with NT) it is expected that amog 2454 women with the same data, there is one woman with a trisomy 21 pregnancy and 2453 women with not affected pregnancies. The free beta HCG level is high.  The calculated risk by PRISCA depends on the accuracy of the information provided by the referring physician. Please note that the risk calculations are statistical aapproaches and have no diagnostic value!  The patient combined risk presumes that NT measurement was done according to accepted guidelines (Prenat Diagn 18:511-523;		